

# APPLICATION FOR UNITED STATES PATENT DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name; that

I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**FUSER AND FIXING MEMBERS CONTAINING PEI-PDMS BLOCK COPOLYMERS**

described and claimed in the specification:

Check one

\*a. ☒ attached hereto.

b. ☐ filed on \_\_\_\_\_ as Application No. \_\_\_\_\_ and amended on \_\_\_\_\_ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, §1.56. Under Title 35, U.S. Code §119, the priority benefits of the following foreign application(s) and/or United States provisional application(s) filed by me or my legal representatives or assigns within one year prior to this application are hereby claimed:

The following application(s) for patent or inventor's certificate on this invention were filed in countries foreign to the United States of America either (a) more than one year prior to this application, or (b) before the filing date of the above-named foreign priority application(s) and/or United States provisional application(s):


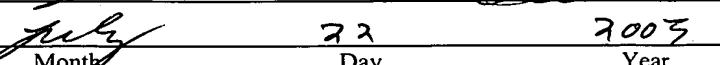
I hereby appoint the following as my attorneys of record with full power of substitution and revocation to prosecute this application and to transact all business in the Patent Office:

James A. Oliff, Registration No. 27,075; William P. Berridge, Registration No. 30,024;  
Kirk M. Hudson, Registration No. 27,562; Thomas J. Pardini, Registration No. 30,411;  
Edward P. Walker, Registration No. 31,450; Robert A. Miller, Registration No. 32,771;  
Mario A. Costantino, Registration No. 33,565; Stephen J. Roe, Registration No. 34,463;  
Joel S. Armstrong, Registration No. 36,430; Christopher W. Brown, Registration No. 38,025;  
Richard E. Rice, Registration No. 31,560; Paul Tsou, Registration No. 37,956;  
Eric D. Morehouse, Registration No. 38,565; Mark Costello, Registration No. 31,342;  
Ronald F. Chapuran, Registration No. 26,402; Richard B. Domingo, Registration No. 36,784;  
Elizabeth F. Harasek, Registration No. 28,850; Kevin R. Kepner, Registration No. 32,145;  
and/or Eugene O. Palazzo, Registration No. 20,881.

**ALL CORRESPONDENCE IN CONNECTION WITH THIS APPLICATION SHOULD BE SENT TO OLIFF & BERRIDGE, PLC, P.O. BOX 19928, ALEXANDRIA, VIRGINIA 22320, TELEPHONE (703) 836-6400.**

I hereby declare that I have reviewed and understand the contents of this Declaration, and that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

1 **Typewritten Full Name  
of First or Sole Inventor**


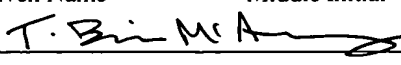
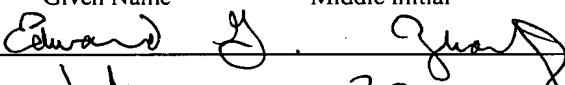
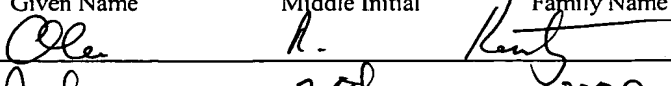
	Peter	G.	ODELL
	Given Name	Middle Initial	Family Name
2	<b>**INVENTOR'S SIGNATURE:</b> 		
3	<b>**DATE OF SIGNATURE:</b> 		
	Month	Day	Year
Residence:	Mississauga	Ontario	Canada
	City	State or Province	Country
Citizenship:	Canada		
	Post Office Address:		
	(Insert complete mailing address, including country)		
	1855 Balsam Avenue		
	Mississauga, Ontario, Canada L5J 1L3		

\*This form may be executed only when attached to the specification (including claims) at the end thereof if Box a. is checked.

\*\*Note to Inventor: Please sign name exactly as it appears above and insert actual date of signing.

IF THERE IS MORE THAN ONE INVENTOR USE PAGE 2 AND PLACE AN "X" HERE ☒

Page 2 OF U.S.A. DECLARATION FORM  
(Discard this page in a sole inventor application)

1	<b>Typewritten Full Name of Second Joint Inventor (if any)</b>	Subajinie		SATHIYAVANTHAN
		Given Name	Middle Initial	Family Name
2	<b>**INVENTOR'S SIGNATURE:</b>			
3	<b>**DATE OF SIGNATURE:</b>	July	22	2003
		Month	Day	Year
	Residence:	Rexdale	Ontario	Canada
		City	State or Province	Country
	Citizenship:	Canada		
	Post Office Address: (Insert complete mailing address, including country)	31 Haimer Avenue Rexdale, Ontario, Canada M9V 4C7		
1	<b>Typewritten Full Name of Third Joint Inventor (if any)</b>	T.	Brian	MCANENEY
		Given Name	Middle Initial	Family Name
2	<b>**INVENTOR'S SIGNATURE:</b>			
3	<b>**DATE OF SIGNATURE:</b>	July	22	2003
		Month	Day	Year
	Residence:	Burlington	Ontario	Canada
		City	State or Province	Country
	Citizenship:	Canada		
	Post Office Address: (Insert complete mailing address, including country)	.581 Woodview Road Burlington, Ontario, Canada L7N 2Z9		
1	<b>Typewritten Full Name of Fourth Joint Inventor (if any)</b>	Edward	G.	ZWARTZ
		Given Name	Middle Initial	Family Name
2	<b>**INVENTOR'S SIGNATURE:</b>			
3	<b>**DATE OF SIGNATURE:</b>	July	22	2003
		Month	Day	Year
	Residence:	Mississauga	Ontario	Canada
		City	State or Province	Country
	Citizenship:	Canada		
	Post Office Address: (Insert complete mailing address, including country)	915 Invershouse Drive, Unit 85 Mississauga, Ontario, Canada L5J 4B2		
1	<b>Typewritten Full Name of Fifth Joint Inventor (if any)</b>	Alan	R.	KUNTZ
		Given Name	Middle Initial	Family Name
2	<b>**INVENTOR'S SIGNATURE:</b>			
3	<b>**DATE OF SIGNATURE:</b>	July	2003	2003
		Month	Day	Year
	Residence:	Webster	New York	USA
		City	State or Province	Country
	Citizenship:	USA		
	Post Office Address: (Insert complete mailing address, including country)	427 Woodland Lane Webster, NY 14580		

**\*\*Note to Inventors:** Please sign name exactly as it appears and insert the actual date of signing.  
This form may be executed only when attached to the first page of the Declaration and Power of Attorney form and the specification (including claims) of the application to which it pertains.

**IF THERE IS MORE THAN FIVE INVENTORS USE PAGE 3 AND PLACE AN "X" HERE** ☒

Page 3 OF U.S.A. DECLARATION FORM  
(Discard this page in a sole inventor application)

1 **Typewritten Full Name  
of Sixth Joint Inventor (if any)**

George	A.	RIEHLE
Given Name	Middle Initial	Family Name

2 **\*\*INVENTOR'S SIGNATURE:**

*George A. Riehle*

3 **\*\*DATE OF SIGNATURE:**

July	24	2003
Month	Day	Year

Residence:	Webster	New York	USA
	City	State or Province	Country

Citizenship: USA

Post Office Address:  
(Insert complete  
mailing address,  
including country)

924 Gravel Road  
Webster, NY 14508

1 **Typewritten Full Name  
of Seventh Joint Inventor (if any)**

David	J.	GERVASI
Given Name	Middle Initial	Family Name

2 **\*\*INVENTOR'S SIGNATURE:**

*David J. Gervasi*

3 **\*\*DATE OF SIGNATURE:**

July	24	2003
Month	Day	Year

Residence:	West Henrietta	New York	USA
	City	State or Province	Country

Citizenship: USA

Post Office Address:  
(Insert complete  
mailing address,  
including country)

88 Alton Way  
West Henrietta, NY 14586

1 **Typewritten Full Name  
of Eighth Joint Inventor (if any)**

David	M.	THOMPSON
Given Name	Middle Initial	Family Name

2 **\*\*INVENTOR'S SIGNATURE:**

*David M. Thompson*

3 **\*\*DATE OF SIGNATURE:**

July	24	2003
Month	Day	Year

Residence:	Webster	New York	USA
	City	State or Province	Country

Citizenship: USA

Post Office Address:  
(Insert complete  
mailing address,  
including country)

1133 Appian Drive  
Webster, NY 14580

1 **Typewritten Full Name  
of Ninth Joint Inventor (if any)**

Karen	A.	MOFFAT
Given Name	Middle Initial	Family Name

2 **\*\*INVENTOR'S SIGNATURE:**

*Karen A. Moffat*

3 **\*\*DATE OF SIGNATURE:**

July	22	2003
Month	Day	Year

Residence:	Brantford	Ontario	Canada
	City	State or Province	Country

Citizenship: Canada

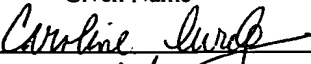
Post Office Address:  
(Insert complete  
mailing address,  
including country)

~~7 Majestic Court~~ 85 Royal Oak Drive  
Brantford, Ontario, Canada ~~N3P 1N2~~ N3R 7P8

**\*\*Note to Inventors:** Please sign name exactly as it appears and insert the actual date of signing.  
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**IF THERE IS MORE THAN NINE INVENTORS USE PAGE 4 AND PLACE AN "X" HERE** ☒

Page 4 OF U.S.A. DECLARATION FORM  
(Discard this page in a sole inventor application)

1	<b>Typewritten Full Name of Tenth Joint Inventor (if any)</b>	Caroline	M.	TUREK
		Given Name	Middle Initial	Family Name
2	<b>**INVENTOR'S SIGNATURE:</b>			
3	<b>**DATE OF SIGNATURE:</b>	July	22	2003
		Month	Day	Year
	Residence:	Hamilton	Ontario	Canada
		City	State or Province	Country
	Citizenship:	Canada		
	Post Office Address: (Insert complete mailing address, including country)	140 Robinson Street, #1401 Hamilton, Ontario, Canada L8P 4R6		
1	<b>Typewritten Full Name of Eleventh Joint Inventor (if any)</b>			
		Given Name	Middle Initial	Family Name
2	<b>**INVENTOR'S SIGNATURE:</b>			
3	<b>**DATE OF SIGNATURE:</b>			
		Month	Day	Year
	Residence:			
		City	State or Province	Country
	Citizenship:			
	Post Office Address: (Insert complete mailing address, including country)			
1	<b>Typewritten Full Name Of Twelfth Joint Inventor (if any)</b>			
		Given Name	Middle Initial	Family Name
2	<b>**INVENTOR'S SIGNATURE:</b>			
3	<b>**DATE OF SIGNATURE:</b>			
		Month	Day	Year
	Residence:			
		City	State or Province	Country
	Citizenship:			
	Post Office Address: (Insert complete mailing address, including country)			
1	<b>Typewritten Full Name of Thirteenth Joint Inventor (if any)</b>			
		Given Name	Middle Initial	Family Name
2	<b>**INVENTOR'S SIGNATURE:</b>			
3	<b>**DATE OF SIGNATURE:</b>			
		Month	Day	Year
	Residence:			
		City	State or Province	Country
	Citizenship:			
	Post Office Address: (Insert complete mailing address, including country)			

**\*\*Note to Inventors:** Please sign name exactly as it appears and insert the actual date of signing.  
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